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## BIB DATA SHEET

CONFIRMATION NO. 5599

<b>SERIAL NUMBER</b> 09/991,799	<b>FILING or 371(c) DATE</b> 11/23/2001 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1649	<b>ATTORNEY DOCKET NO.</b> 2132.086
<b>APPLICANTS</b> George Jackowski, Kettleby, CANADA; <i>pl</i> John Marshall, Toronto, CANADA;				
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** * SMALL ENTITY **</b> \ 12/31/2001				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <i>Blahyn</i> Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 38
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> MCHALE & SLAVIN, P.A. 2855 PGA BLVD PALM BEACH GARDENS, FL 33410 UNITED STATES				
<b>TITLE</b> PLASMA PROTEASE C1 INHIBITOR BIOPOLYMER MARKER INDICATIVE OF ALZHEIMERS DISEASE				
<b>FILING FEE RECEIVED</b> 681	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	